



September 27, 2008

To: All Interested Vendors

Re: Request for Information

The State of Montana, Department of Corrections and Department of Public Health and Human Services are requesting information regarding a Psychiatric Residential Treatment Facility for youth. The State of Montana invites all interested parties to submit a written response to this Request for Information (RFI).

This RFI is being sought strictly for the purpose of gaining knowledge of services and supplies available with an estimate of their corresponding costs and should not be construed as intent, commitment, or promise to acquire services, supplies, or solutions offered. No contract will result from any response to this RFI.

Information submitted in response to this RFI will become the property of the State of Montana.

The State of Montana will not pay for any information herein requested nor is it liable for any cost incurred by the vendor.

RFI responses must be received prior to October 10, 2008 at the following address:

Procurement Officer: Rob Stapley  
Address: P.O. Box 201301  
Telephone Number: 406-444-4236  
Fax Number: 406-444-9818  
E-mail Address: [rstapley@mt.gov](mailto:rstapley@mt.gov)

All questions, including procedural, administrative, contractual, technical, and requirement questions and answers may be directed to the procurement officer listed above.

We appreciate your response to this request.

## **1.0 PURPOSE AND OBJECTIVES**

The objective of this request is to identify entities interested in providing an in-state Psychiatric Residential Treatment Facility for both male and female youth ages 10 - 17. Currently, some Montana youth may be placed in out-of-state treatment facilities. Based on current population trends and placements, both instate and out, we anticipate that the facility may serve approximately 20 youth.

## **2.0 PROJECT DESCRIPTION**

Interested parties would be required to provide a 24-hour Psychiatric Residential Treatment Facility to treat youth with mental illness or behavioral health issues. Some, but not all, of these youth may be adjudicated to a DOC Correctional Facility, on probation, involved with foster care, have Medicaid as a primary payment source, and/or have family or community support inadequate to meet their needs.

The facility must:

- 1) Be eligible for Medicaid reimbursement: complies with 42 CFR 440.160; 42 CFR 441 Subpart D; and 42 CFR 483 Subpart G.
- 2) Be willing to become a Medicaid provider and accept Medicaid reimbursement
- 3) Provide secure beds
- 4) Attain school accreditation by Montana Office of Public Education (preferred) or Northwest Association of Accredited Schools
- 5) Be located within 30 minutes of 24-hour emergency medical and fire services.
- 6) Be willing to submit to a right of refusal process for intakes or discharges through a Review Board
- 7) Provide psychiatric assessment and reassessment services; both to inpatient and possible outpatient clients
- 8) Provide male and female segregation
- 9) Provide 1-male and 1-female crisis intervention bed
- 10) Be licensed by the Montana Department of Public Health and Human Services as a Residential Treatment Facility
- 11) Be accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), Council on Accreditation (COA) or Commission on Accreditation of Rehabilitation Facilities (CARF)
- 12) Provide training and education requirements of staff (Franklin)

Funding for this program will be provided through Medicaid and State General Fund

### **3.0 RFI RESPONSE INSTRUCTIONS**

The State is asking all interested parties to submit a response containing the following information:

- ✓ Your level of interest in providing the services if a bed facility or unit(s) in a facility is put out for bid. Please indicate the minimum number of beds that would be feasible for your organization to serve.
- ✓ Brief description of past experience providing similar services/supplies.
- ✓ Additional treatment services offered by your organization that may benefit the youth to be served in this program. (Example: treatment for sex offenders or sexually reactive youth, youth with low cognitive functioning, forensic populations, physical aggression, chemical dependency, etc.)
- ✓ Description of staff training provided and policies for ongoing training and education.
- ✓ From your past experience, has the State identified all the major components necessary to complete this project? If not, please provide information on other necessary components.
- ✓ Please provide a list of potential problems/risks that the State may encounter during this project. Please provide any ideas or suggestions about how such problems/risks should be addressed in a solicitation.
- ✓ Your best estimated price range to provide the services/supplies as stated herein, lowest estimate to highest estimate. Please differentiate between the numbers of youth you are proposing to serve if this will make a difference in your estimate.
- ✓ Your best estimated time frame for beginning service provision.